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Attorney Docket No.		,): C
First Inventor		Santiago Munne	E C C C C C C C C C C
 Title	obtaining no		
Cinco			

UTILITY PATENT APPLICATION **TRANSMITTAL**

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Only for new nonprovision	nal applications under 37 CFR 1.53(b))	Ex	press Mail Label No.					
	TION ELEMENTS		ADDDECC TO.	Box Patent A	pplicat			
	cerning utility patent application contents		7 D 00 001 00	Washington,				
	orm (e.g., PTO/SB/17) duplicate for fee processing)	-	7. CD-ROM or CD Computer Progr			e table or		
2. Applicant claims s See 37 CFR 1.27.			8. Nucleotide and/or Amir (if applicable, all neces	no Acid Sequ		ubmission		
3. Specification (preferred arrangement)	[Total Pages 9] t set forth below)		a. Computer Readable Form (CRF)					
 Descriptive title of the invention Cross Reference to Related Applications 			b. Specification Sequence Listing on:					
- Statement Reg	arding Fed sponsored R & D		i. CD-ROM or CD-R (2 copies); or					
	equence listing, a table,		ii. 🔲 paper					
- Background of	program listing appendix the Invention		c. Statements verifying identity of above copies					
- Brief Summary	of the Invention n of the Drawings (if filed)		ACCOMPANYIN	NG APPLIC	CATIO	ON PARTS		
- Detailed Descri			9. Assignment Papers (cover sheet & document(s))					
- Claim(s) - Abstract of the Disclosure			10. 37 CFR 3.73(b) Statement Power of Attorney					
4. Drawing(s) (35 U	I.S.C. 113) [Total Sheets	, ·	11. English Transl	lation Docume	ent <i>(if a</i>			
5. Oath or Declaration [Total Pages] 12. Information Disclosure Statement (IDS)/PTO-1						Copies of IDS Citations		
a. Newly executed (original or copy)								
Copy from a prior application (37 CFR 1.63 (d)) b. (for continuation/divisional with Box 18 completed) Return Receipt Postcard (MPEP 503) (Should be specifically itemized)					503)			
i. DELETION OF INVENTOR(S) 15. Certified Copy of Priority Document(s)						nt(s)		
named in	atement attached deleting inventor(s) the prior application, see 37 CFR		16 Nonpublication	n Request un	der 35			
1.63(d)(2) and 1.33(b). (b)(2)(B)(i). Applicant must attach form PTO/SB/or its equivalent.				form PTO/SB/35				
6. Application Data Sheet. See 37 CFR 1.76								
18. If a CONTINUING APPL or in an Application Data She	ICATION, check appropriate box, and su	pply th	ne requisite information be	elow and in a	prelimi	nary amendment,		
Continuation	Divisional Continuation-in-part (CIP	'}	of prior application No					
Continuation Divisional Continuation-in-part (CIP) of prior application No.: / Prior application information: Examiner: Group Art Unit:								
	IONAL APPS only: The entire disclosure of							
	f the disclosure of the accompanying conti relied upon when a portion has been inady					rated by reference.		
19. CORRESPONDENCE ADDRESS								
Customer Number or Bar Code Label [Insert Customer No. or Attach bar code label here] Or Correspondence address below								
Name	Santiago Munne							
	220 Washington Str Apt 4							
Address				·				
City	Hoboken	Sta	State NJ Zip		Code	07030		
Country	USA Te	elepho	one 201-386896	2 F	эх	973-3226235		
Name (Print/Type)	Name (Print/Type) Santiago Munne / // Registration No. (Attorney/Agent)					,		
Signature	[antiffe	7)		Date	7/2	2/03		
	1 - 1 pm 1/1				17.			

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FEE TRANSMITTA	1 L	Complete if Known						
FEE INANSIMILIA	- լ	Application Number						
for FY 2003		Filing Date						
Effective 01/01/2003. Patent fees are subject to annual revision		First N	Vamed	Inven	tor	Santiago Munne		
		Examiner Name						
Applicant claims small entity status. See 37 CFR 1.27		Art Ur	nit					
TOTAL AMOUNT OF PAYMENT (\$)		Attorney Docket No.						
METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)						
Check Credit card Money Other None	3. ADDITIONAL FEES Large Entity Small Entity							
Deposit Account:		_	Fee					
Deposit	Fee Code		Code	Fee (\$)		Fee Description	Fee Paid	
Account Number	1051	130	2051	65	Surch	arge - late filing fee or oath		
Deposit Account	1052	50	2052			arge - late provisional filing fee or		
Name	1053	130	1053		cover Non-E	nglish specification		
The Director is authorized to: (check all that apply) Charge fee(s) indicated below Credit any overpayments		2,520		•		ng a request for ex parte reexamination		
Charge any additional fee(s) during the pendency of this application	1804	920*	1804			esting publication of SIR prior to iner action		
Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.	1805	1,840*	1805	1,840*		esting publication of SIR after iner action		
FEE CALCULATION	1251	110	2251	5 5	Exten	sion for reply within first month	1.	
1. BASIC FILING FEE	1252	410	2252	205	Exter	sion for reply within second month		
Large Entity Small Entity	1253	930	2253	465	Exten	sion for reply within third month		
Fee Fee Fee Fee Fee Description Fee Paid Code (\$) Code (\$)	1254	1,450	2254	725	Exten	sion for reply within fourth month		
1001 750 2001 375 Utility filing fee 375	1255	1,970	2255	985	Exter	sion for reply within fifth month	- 2	
1002 330 2002 165 Design filing fee	1401	320	. 2401	160	Notice	e of Appeal		
1003 520 2003 260 Plant filing fee	1402	320	2402	160	Filing	a brief in support of an appeal		
1004 750 2004 375 Reissue filing fee	1403	280	2403	140	Requ	est for oral hearing		
1005 160 2005 80 Provisional filing fee	1451	1,510	1451	1,510	Petitio	on to institute a public use proceeding		
SUBTOTAL (1) (\$) 375	1452	ʻ110	2452			on to revive - unavoidable		
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE		1,300	2453			on to revive - unintentional		
Fee from Extra Claims below Fee Paid	1501	1,300	2501		-	rissue fee (or reissue)		
Total Claims 4	1502 1503	470 630	2502 2503		_	n issue fee issue fee		
Independent Claims 3 - 3** = 0 X = 0	1460	130	1460			ons to the Commissioner		
Multiple Dependent	1807	50	180					
Large Entity Small Entity						essing fee under 37 CFR 1.17(q)		
Fee Fee Fee Fee Description	1806	180	180			ission of Information Disclosure Stmt and inglession of Information Disclosure Stmt		
Code (\$)	8021	40	802	1 40	prope	rty (times number of properties)		
1201 84 2201 42 Independent claims in excess of 3	1809	750	2809	9 375		a submission after final rejection FR 1.129(a))	İ	
1203 280 2203 140 Multiple dependent claim, if not paid	1810	750	281	0 375	•	ach additional invention to be		
1204 84 2204 42 ** Reissue independent claims over original patent	1801		2801		exam	ined (37 CFR 1.129(b)) uest for Continued Examination (RCE)		
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent	1802		1802		Req	uest for expedited examination design application		
	Other	fee (sp	ecify) _					
**or number previously paid, if greater; For Reissues, see above	*Redu	ced by	Basic	Filing Fe	ee Pai	d SUBTOTAL (3) (\$) 0		
SUBMITTED BY (Complete (if applicable)								
Name (Print/Type) Santiago Munne / ///		Registra). T		Telephone 9733226236		
Signature (Ma)		Attorney/	Agent)			Date 07/21/2003		

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	Sample Form (former PTO/SB/15) (06-03)				
ASSIGNMENT OF APPLICATION	Docket Number (Optional)				
Whereas IWe, SANTIAGO MUNNE of REPROC	FENETICS, nereafter				
referred to as applicant, have invented certain new and useful improvements. DISOMIC STEM CELLS FROM CHROMOSOMALLY ABNORMAL E					
\square for which an application for a United States Patent was filed on $= \frac{1}{2}$	1. 1. 1. 17 字 B. 1. 17 15 15 15 15 15 15 15 15 15 15 15 15 15				
Application Number					
for which an application for a United States Patent was executer on	and				
Whereas, of	here referred				
to "assignee" whose mailing address is	48 N. 17 17 17 17 18 N. 18 18 18 18 18 18 18 18 18 18 18 18 18				
desirous of acquiring the entire right, title and interest in the same;					
hereby authorize and request the Director of the U.S. Patent and Trademark Patent to said assignee, of the entire right, title, and interest in and to the san for the use and behoof of his legal representatives, to the full end of the trademark as fully and entirely as the same would have been held by me had made. Executed this All Agy of July	ne, for his sole use and behoof and term for which said Patent may be this assignment and sale not been				
at Reproperation					
State of As	∭//// ign≱ture				
	egistration No. if applicable				
Before me personally appeared said					
and acknowledged the foregoing instrument to be his free act and deed this					
day of					
Seal					
Note: Signatures of all the inventors or assignees of record of the entire interest or their representa	ative(s) are required. Submit multiple forms if				